Statement of Contributions Received

Prescribed by Secretary of State 03/05

| Name of Committee in Full | | | | |
|------------------------------------|--|---|-----------------------------|--------------------------|
| Friends of Liliana Rivera Baiman | | | | |
| Full Name of Contributor | | | Registration Number, | , if PAC |
| Patrick Omahen | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | nization* | Form (Cash, Check, etc.) |
| 1113 Herkimer St | US Department of Veterans Affairs / researcher | | ffairs / researcher | online portal |
| City | State | Zip Code | Date | Amount |
| Houston | TX | | 03/21/2019 | \$20.00 |
| Full Name of Contributor | ator | | Registration Number, if PAC | |
| Joel Gleason | leason | | | |
| Street Address | Employer | Employer/Occupation/Labor Organization* | | Form (Cash, Check, etc.) |
| 1018 Lakeview Dr | Clearvie | Clearview Local Schools / Teacher | | online portal |
| City | State | Zip Code | Date | Amount |
| Lorain | ОН | 44052 | 03/21/2019 | \$14.00 |
| Full Name of Contributor | <u></u> | _ | Registration Number, | ifPAC |
| fary Ann Ronfeldt | | | l | |
| Street Address | Employer. | Occupation/Labor Organ | nization* | Form (Cash, Check, etc.) |
| 3934 Santa Maria Dr | Mount Carmel East / Rn | | | online portal |
| City | State | Zip Code | Date | Amount |
| Grove City | ОН | 43123 | 03/21/2019 | \$50.00 |
| Full Name of Contributor | <u> </u> | ·* | Registration Number, | |
| Benjamin McKean | | | | |
| Street Address | | | | Form (Cash, Check, etc.) |
| 313 E Blenkner St | | Ohio State University / assistant professor | | online portal |
| City | State | Zip Code | Date | Amount |
| Columbus | ОН | | 03/21/2019 | \$80.00 |
| Full Name of Contributor Registrat | | | Registration Number, | |
| Barbara Chavez | | | | |
| Street Address | Employer/ | Occupation/Labor Organ | nization* | Form (Cash, Check, etc.) |
| 1875 MacKenzie Drive | Ohio State University / RN | | | online portal |
| City | State | Zip Code | Date | Amount |
| Columbus | ОН | 43220 | 03/21/2019 | \$24.80 |
| Full Name of Contributor | Registration Num | | | ifPAC |
| Nathan Lieberum | | | | |
| Street Address | Employer/ | Occupation/Labor Organ | nization* | Form (Cash, Check, etc.) |
| 1235 N 4th St | 1 | ODNR / Engineer | | online portal |
| City | State | Zip Code | Date | Amount |
| Columbus | ОН | 43201 | 03/21/2019 | \$15.00 |
| Full Name of Contributor | | | Registration Number, | |
| eremy Weiss | | | | |
| Street Address | Employer/ | Occupation/Labor Organ | nization* | Form (Cash, Check, etc.) |
| 3061 Indianola Ave, Apt. E | Ohio State University / Senior Lea | | | online portal |
| City | State | Zip Code | Date | Amount |
| Columbus | ОН | 43202 | 03/21/2019 | \$50.00 |
| Full Name of Contributor | | Registration Number, if PAC | | |
| Stephen Brown | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) |
| 1401 Moonhaven Ct | Working Families Party / Organizer | | | online portal |
| City | State | Zip Code | Date | Amount |
| Rockford | IL | 61107 | 03/21/2019 | \$11.00 |

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]